



**TOWN OF BROOKFIELD
ZONING COMMISSION
APPLICATION- ZONE CHANGE**

APPLICANT:

Phone #: _____

Contact Person: _____

Phone #: _____

LAND OWNER OF RECORD: (IF FOR SPECIFIC PARCEL)

Phone #: _____

Contact Person: _____

Phone #: _____

BOUNDARY CHANGE:

- A. Two (2) copies of an official zoning map are attached hereto indicating:
 (i) The area for which the change is requested.
 (ii) The proposed boundary lines and narrative description of the boundaries.
- B. The current Zone Designation is: _____
- C. The Proposed Zoning Designation is: _____
- D. Rationale for the requested change is attached.
- E. A list of adjacent property owners is attached.

REGULATION CHANGE:

- A. The current Section Number is: _____ The current text reads:

- B. The Proposed Section Number is: _____ The Proposed Text or Deletion is:

- C. Rationale for the requested change is attached.
- D. A list of adjacent property owners is attached.

APPLICANT SIGNATURE AND REPRESENTATION:

I apply herewith for a change in the Zoning Regulation of the Town of Brookfield in accordance with Chapter 124, Section 8-3 of the Connecticut General Statutes.

Applicant's Signature: _____ **Date:** _____

FOR COMMISSION USE:

Date Received:
Notice to Planning Comm.:
Hearing Set for:
Disposition:
Notes:

Date Accepted:
Notice to HVCEO:
Publication Dates:
Date:

Fee Collected On:
Notice to Land Owners:

Effective Date:

Chairman, Brookfield Zoning Commission

Comments:

BROOKFIELD ZONING COMMISSION

Decision Criteria – Zone Change Request

I.	<u>ALTERNATE LAND USE IMPACTS:</u>	<u>Residential</u>	<u>Other</u>	<u>Industrial</u>
A. <u>Density of Development:</u>				
Total Acreage		_____	_____	_____
Less: Circulation, Slopes, Wetlands		(_____)	(_____)	(_____)
Available for Development		_____	_____	_____
Number of Sites/Units		_____	_____	N/A
TOTAL Square Feet		N/A	N/A	_____
B. <u>Water Demand:</u>				
100 gpd X _____ heads X sites		_____	_____	N/A
20 gpd X _____ employees		N/A	N/A	_____
_____ gpd, other uses		N/A	_____	_____
TOTAL		_____	_____	_____
C. <u>Traffic:</u>				
_____ TPD x _____ SITES/UNITS		_____	_____	N/A
_____ TPD x k Sq. Ft.		N/A	_____	_____
TOTAL		_____	_____	_____
D. <u>Taxes (Estimates):</u>				
Land Cost		_____	_____	_____
_____ Sq. Ft. X \$ _____/Sq. Ft.		_____	_____	_____
TOTAL COST		_____	_____	_____
Valuation Factor		X _____ .7	X _____ .7	X _____ .7
Assessed Valuation		_____	_____	_____
Less Educ. Exp. (\$7K/student)		(_____)	(_____)	N/A
Balance for other Town Svc.		_____	_____	_____
Assessed Valuation		_____	_____	_____
Number of Units		X _____	X _____	X _____
TOTAL REVENUE		_____	_____	_____

II. PROJECT PRO'S and CON'S:	PRO	CON

E. Other Impacts:

III. CHANGE CRITERIA:

A. Mistake Doctrine: Yes _____ No _____

Explain: _____

B. Change in Circumstance of Conditions: Yes _____ No _____

Explain: _____

C. Spot Zoning Test: Yes _____ No _____

Explain: _____

D. Benefit to Applicant vs. General Welfare:

E. Highest and Best Use:

Not a deciding factor: _____

F. Comprehensive Plan:

(Relate to Specific Purposes of Zoning per Section 242-101 and applicable section of Industrial and Commercial Districts, see paragraph IV, following)

IV. COMPREHENSIVE PLAN – PURPOSES OF ZONING (242-101):*

- | | |
|--|-------|
| A. 1. Most beneficial and convenient relationship among uses. | _____ |
| 2. Suitability of each area for such uses. | _____ |
|
B. 1. Adequate light, air, fire safety, flood risk. | _____ |
| 2. Overcrowding of land. | _____ |
| 3. Undue concentration of population. | _____ |
|
C. 1. Conserve character and environment. | _____ |
| 2. Social and economic stability. | _____ |
|
D. 1. Conserve value of land and building in the District. | _____ |
|
E. 1. General conformity of uses. | _____ |
| 2. Minimize conflicts among uses. | _____ |
|
F. 1. Promote good traffic circulation. | _____ |
| 2. Avoid traffic congestion. | _____ |
| 3. Promote traffic safety. | _____ |
|
G. 1. Provide guide for required services. | _____ |
| 2. Provide guide for investment/development opportunities. | _____ |
|
H. 1. Availability of present/future service capacity.
Re: Transportation, water, schools, open space, etc. | _____ |
|
I. 1. Prevent pollution of watercourses. | _____ |
| 2. Safeguard water table. | _____ |
| 3. Avoid runoff and flood damage. | _____ |
| 4. Manage natural resources. | _____ |
| 5. Retain natural features to maintain stability of land
and building values. | _____ |

*NOTE: Is the reviewer inclined either positively or negatively when considering the proposal against each item cited above, and then, on-balance, which way overall is the reviewer inclined?

V. SPECIAL PURPOSES OF THE DISTRICT:

- A. 1. Geographically suited.
2. Traditionally established.
3. Land will support the development.
4. Efficient and creative use of land.
5. Applicant's benefit vs. general welfare.
6. Protect water resources.

VI. OPINION EXPRESSED AT PUBLIC HEARING:This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

ZONE CHANGE PROPOSALS

Questions to be Answered by Applicant

1. a.) Do you consider a mistake was made in the initial zoning of the property in question?
b.) If your answer to the above is affirmative, what is the nature of said mistake?
2. Do you consider there has been a substantial change in circumstances or conditions affecting the property in question or its immediate surroundings?
3. Refer to the stated purposes of the zone in question.
 - a.) How does each aspect of this stated purpose relate to your proposal?
 - b.) Has the WPCA rendered an opinion as to the possible extension of the sewer line to service your project?
 - c.) Are you aware that since this would be an expansion of a municipal service, it requires the approval of the Planning Commission?
4. Relative to your proposal, state why you consider the benefit to the Town at large is greater than the benefit to the applicant.
5. How would you offset any adverse impact on the surrounding residential property owners, especially any potential for the diminution of property values?
6. Is the applicant fully aware that although a use within a zone is permitted by the regulations, there is no guarantee that this particular use will meet all the requirements of the Design Review Process?
7. If the Commission were to approve your application, what reasons would you consider appropriate for rendering such a decision?

SAMPLE NOTIFICATION LETTER

Date

To:

Name

Street Address

City, State, Zip

This is to notify you that an application for a zone change has been filed by _____
(applicant name)
for property located at _____, Brookfield, CT. The zone change
(property address)
requested is for:

(regulation # and purpose)

This application is on file in the Town of Brookfield Land Use Office for review.

The Brookfield Zoning Commission will hold a Public Hearing to consider this application on

_____, at the Brookfield Town Hall, 100 Pocono Road, Brookfield, CT.,
(day and date, month, year)

beginning at _____ p.m. The hearing will be open to the public and you are hereby advised that opportunity to speak in favor or opposition to this variance will be granted at said Public Hearing. Your appearance is not mandatory, but the Zoning Commission would appreciate your comments by mail if you cannot attend the meeting.

Responses may be mailed to :

Zoning Commission
Town of Brookfield
100 Pocono Rd.
Brookfield, Ct. 06804

If you have any questions regarding this application, please call the Town of Brookfield Land Use Office at 203-775-7316.

Applicant Signature